<u> 3</u>97AFP

PART B - 'FEE(S) TRANSMITTAL

omplete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (571) 273-2885

CONFIRMATION NO.

or <u>Fax</u>

TRUCTION In form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where the property of the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as careful below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for interpretable for profiferations. STRUCTIQ maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

FILING DATE

020349

APPLICATION NO.

4a. The following fee(s) are enclosed:

XX Issue Fee

7590

09/19/2005

POLAROID CORPORATION PATENT DEPARTMENT 1265 MAIN STREET WALTHAM, MA 02451

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)	Gaetano D. Maccarone
(Signature)	berone
(Date)	November 21, 2005

ATTORNEY DOCKET NO.

09/653,598	08/31/2000	Philip D. Chapnik			8397/PMC	4613
TITLE OF INVENTION: I	ELECTRONIC CAMERA EN	APLOYING REFL	ECTIVE FLAT	PANEL DISPLAY FOR V	VIEWING AND PRINTING IN	1AGES
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400		\$0	\$1400	12/19/2005
EXAMINER		ART UN	пт	CLASS-SUBCLASS	7	
JELINEK	JELINEK, BRIAN J			348-207200		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME ANI	D RESIDENCE DATA TO B	E PRINTED ON T	THE PATENT (print or type)		
PLEASE NOTE: Unles recordation as set forth i	s an assignee is identified be n 37 CFR 3.11. Completion of	elow, no assignee of this form is NO	data will appea T a substitute fo	r on the patent. If an assign filing an assignment.	gnee is identified below, the d	ocument has been filed for
(A) NAME OF ASSIGNEE) RESIDENCE	(CITY and STATE OR CO	OUNTRY)	
POLAROID CORPORATION			Waltham	, Massachusetts	S	
Please check the appropriat	e assignee category or category	ries (will not be pri	inted on the pate	ent): 🔲 Individual 🖾	Corporation or other private gro	oup entity Governmen

FIRST NAMED INVENTOR

X The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 16-2195 (enclose an extra copy of this form). XX Advance Order - # of Copies _ 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

4b. Payment of Fee(s):

November 21, 2005 Authorized Signature Date 25,173 Typed or printed name <u>Gaetano D. Maccarone</u> Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Publication Fee (No small entity discount permitted)